Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
	Energy, Minerals and Natural Resources	June 19, 2008 WELL API NO.
District I 1625 N French Dr., Hobbs, NM 882 District II	EIVED	30-025-39325
THE SECOND SERVICE OF THE SECOND SERVICE OF THE SECOND SERVICE OF THE SECOND SERVICE OF THE SECOND S		5. Indicate Type of Lease
District III 1000 Rio Brazos Rd, Aztec, NM 87410 Santa Fe. NM 87505		STATE S FEE
District IV 1220 S St. Francis Dr., Santa Fe, NM FOBBSOCD Santa Fe, NM 87505		6. State Oil & Gas Lease No VO-6326
	AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		Reba BNT State
1. Type of Well: Oil Well Gas Well Other		8. Well Number
2. Name of Operator		9. OGRID Number
Yates Petroleum Corporation		025575
3. Address of Operator		10. Pool name or Wildcat
105 South Fourth Street, Artesia, NM 88210		Llano; Upper Penn
4. Well Location		
Unit Letter E : 2310	phones — w no martement on compt	990 feet from the West line
Section 32	Township 11S Range 35E	
11	Elevation (Show whether DR, RKB, RT, GR, 4166' GR	elc.)
****	4100 GR	t .
12 Check Appr	opriate Box to Indicate Nature of Not	ice Report or Other Data
• •		and the second s
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR		_
TEMPORARILY ABANDON		
DOWNHOLE COMMINGLE	DETIFEE COMPL CASING/CEP	: :
DOWN TOLL COMMINGEL		
OTHER:	☐ OTHER	Drillling 5' of new hole
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date		
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.		
of recompletion.		
6/19/09 Made 5' of new hole @ 10:30 a.m. TD = 50'. Notified Sylvia Dickey w/Hobbs NMOCD via e-mail.		
<u> </u>		
Spud Date:	Rig Release Date:	
	;	
I harshy cartify that the information above	e is true and complete to the best of my know	todge and helief
i nereby certify that the information abov	e is true and complete to the best of my know	reage and benef.
\sim	· ·	
SIGNATURE CLUMENT	TITLE Regulatory Compli	ance Technician DATE 6/22/09
Type or print name Allies D	E mail address.	DHONE ' (575) 740 4005
Type or print name Allison Barton For State Use Only	E-mail address: abarton@ypcu	
20. State Ost Only	SETUDI MALEA	MANAGER STATE
APPROVED BY:	TITLE PETROLEUM EN	MANNESSE DATE JUN 2 6 2009
Conditions of Approval (if any):	**	
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